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| AMENDMENT TRANSMITTAL LETTER | | | DOCKET NUMBER: P-LA 4798 | |
| SERIAL NO: 09/892,071 | FILING DATE: June 26, 2001 | EXAMINER: B. Chism | GROUP ART UNIT: 1652 | |
| INVENTION: CONFORMATIONALLY STABILIZED CELL ADHESION PEPTIDES | | | | |

TO COMMISSIONER FOR PATENTS

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

"EXPRESS MAIL" MAILING LABEL NUMBER: EL 85704499 US

DATE OF DEPOSIT: December 5, 2002

I HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING
DEPOSITED WITH THE UNITED STATES POSTAL SERVICE
"EXPRESS MAIL POST OFFICE TO ADDRESSEE" SERVICE UNDER
37 C.F.R. 1.10 ON THE DATE INDICATED ABOVE, AND IS
ADDRESSED TO: COMMISSIONER FOR PATENTS WASHINGTON, D.C. 20231.

Lisa Oliver
(TYPED OR PRINTED NAME OF PERSON MAILING PAPER OR FEE)Lisa Oliver
(SIGNATURE OF PERSON MAILING PAPER OR FEE)

Transmitted herewith is a Response to the Office Action,
mailed June 6, 2002, with attached Appendix A, in the above-
identified application.

- Small Entity status of this application has been
established under 37 CFR 1.27.
- X Petition for a three-month Extension of Time is
enclosed (in duplicate).
- Terminal Disclaimer with fee under 37 C.F.R. 1.20(d) is
enclosed.
- No additional claims fee is required.
- X An additional claims fee is required and has been
calculated as shown below:

CLAIMS AS AMENDED

| | NUMBER AFTER AMEND- MENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | | NUMBER OF EXTRA CLAIMS PRESENTED | | RATE | | FEE | |
|---|-----------------------------------|---|---|---|---|---|-------------------------|-----------------|-----------------|-----------------|
| | | | | | | | SMALL ENTITY | OTHER ENTITY | SMALL ENTITY | OTHER ENTITY |
| TOTAL CLAIMS | 10 | - | 20 | - | 0 | x | \$9 | \$18 | = \$ | \$0 |
| INDEPEN- DENT CLAIMS | 9 | - | 5 | - | 4 | x | \$42 | \$84 | = \$ | \$336 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | YES | | x NO | | \$140 | \$280 | = \$ | \$0 |
| | | | | | | | TOTAL ADDITIONAL FEE | | \$ | \$336 |

* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in
this space.

** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in
this space.

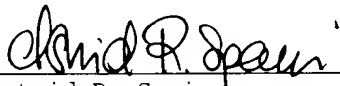
*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST
NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.

— Please charge my Deposit Account No. 03-0370 the amount of
\$_____. A duplicate copy of this sheet is enclosed.

Inventors: Pierschbacher and Ruoslahti
Serial No.: 09/892,071
Filed: June 26, 2001
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- X A check in the amount of \$1,256.00 is enclosed, \$336.00 of which covers the additional claims fee, and \$920.00 of which covers the fee for a three-month extension of time.
- X The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 03-0370. A duplicate copy of this sheet is enclosed.
- X The Commissioner is hereby authorized to charge to Deposit Account No. 03-0370 any fees under 37 CFR 1.17 which may be required under 37 CFR 1.136(a)(3) for an extension of time in any concurrent or future reply requiring a petition for extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,


Astrid R. Spain
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